



Texas Department of Insurance

Rate and Form Review Office – Accident and Health Program

Mail Code 106-1D, 333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104
512-322-3409 telephone • 512-322-3552 fax • www.tdi.texas.gov

Certificate of Compliance of Advertising

Use of this form complies with rules covering trade practices, advertising, and solicitation of insurance under 28 Texas Administrative Code Chapter 21, Subchapters A and B.

This certificate must be signed by an officer of the company whose duty it is to oversee the company's advertising, and witnessed and notarized by a notary public. Return the completed form to the Texas Department of Insurance with your Annual Statement.

If your company advertised in Texas during the previous calendar year, indicate that fact below.

I certify that I, _____, _____,
NAME OF AUTHORIZED OFFICER POSITION OR TITLE

am the authorized officer of _____,
NAME OF INSURANCE COMPANY

CITY AND STATE

I have read 28 Texas Administrative Code Chapter 21; Subchapters A and B and to the best of my knowledge, information, and belief,

☐ the advertisements that the company used during the _____ statement year complied or were made to comply fully with Texas insurance laws under these Subchapters.

The advertising file maintained by the above company, as required by 28 Texas Administrative Code, Section 21.116(a), **is located at**

PHYSICAL ADDRESS CITY AND STATE
and contains an example of all advertisements and a list of or information about the extent of distribution.

or,

☐ the company did not advertise in Texas during calendar year _____

SIGNATURE OF AUTHORIZED OFFICER

The State of _____ §

County of _____ §

Before me, _____, a notary public in and for the State of _____,
PRINTED NOTARY'S NAME

on this day personally appeared _____, known to me
PRINT NAME OF SIGNING INDIVIDUAL

[or proved to me on the oath of _____ or through
PRINTED NAME OF WITNESS KNOWN TO NOTARY PUBLIC

DESCRIPTION OF IDENTITY CARD OR OTHER DOCUMENT

to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that she or he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, A.D., _____.

NOTARY PUBLIC

IN AND FOR (COUNTY AND STATE)